

Avera McKennan Hospital
Patient: MYERS, RICHARD DALE
DOB: [REDACTED] M/25
Acct: [REDACTED] MR: [REDACTED]
Adm: 01/14/19 Dsch: 01/15/19
Loc: MK.BH.AAP Rm: B.1464 Status: DIS IN
Attending: Weatherill, Jay E MD

Finances

- Pt is currently unemployed. He completed 11th grade and obtained a GED. He does not have health insurance.

Current Living Arrangements

- House

Where do you plan to go after discharge

- He will stay with family in Brookings

Do you anticipate any need for community resources

- medication management, therapy, addictions treatment

Social Work Assessment

- Introduced self to patient, discussed current social history and discharge planning. Pleasant with conversation. Pt plans to return home with family in Brookings. He will continue outpatient care with providers at East Central Mental Health Center. He admits to abusing and states a desire to discontinue medications at this time. He does not see a need for addictions treatment. Pt request that writer call his mother about discharge transportations.

Writer spoke to pt's mother, Michelle ([REDACTED]). She explained that she does not have guardianship of pt. This is something that had been talked about in the past but she had not folloed through on. She initially was hesitant to allow pt to return home. She explained that he has been abusing his prescriptions, he has been aggressive towards family during these periods. He hit his mother in the head a week ago, sister assaulted after she tried to itervene. Sister punched several times on Saturday. Sister has a broaken nose and 2 black eyes. Charges were not pressed due to pt's recent prison time. We discussed the IVC process, mom will visit courthouse and obtain an attorney to file this motion. She is hoping when pt returns to Brookings he can be detained and held in jail pending addictions treatment. Mom will not be able to provide a ride for pt. Pt would need to take a bus from Sioux Falls to Brookings tomorrow. Writer discussed this with pt. He is agreeable with taking a bus to Brookings tomorrow. He is not wanting to spend another day in the hospital. He explains that he will stay with a friends in Sioux Falls tonight and then take a bus back to Brookings tomorrow. Pt's mother is agreeable with pt's plan, she questions if he has sober friends in Sioux Falls. Whe will work on residential options for patient if he is not able to be detained yet on an IVC tomorrow.

Avera Foundation will cover the cost of a bus ticket from Sioux Falls to Brookings on January 16.

Scoial services will continue to follow and assist as needed.

Discharge Condition: Stable

Discharge Disposition: Home

Meditech report ID number: [REDACTED] Facility: MCK/MR

Signed
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DISCHARGE SUMMARY

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(5) Mild intellectual disability

(6) Tobacco use disorder

Secondary Diagnoses:

Consolidated Plan

January 15, 2019

Note dictated using dragon voice recognition software.

Psychiatric Attending Addendum: Total time-Greater than 70 minutes, more than 50% of time spent counseling and coordination of care, review of medical records, preparation of discharge records and discharge medication list with prescriptions if warranted. Patient discussed in treatment team meeting. Patient seen, interviewed, and evaluated by recorder. Record reviewed, discussed with and agree with the above provider's diagnosis and treatment plan.

Patient was seen within 24 hours of Resident/Mid-level Evaluation

Disposition discussed with patient including discharge instructions.

Note dictated using Dragon voice recognition software

Patient struggles with irritable outbursts and violence when he uses alcohol. The patient's mother agreed to file an involuntary chemical dependency treatment commitment.

Continue current psychotropics

Supportive psychotherapy and psychoeducation regarding discharge plans

Safety crisis plan reviewed in case of worsening of mental status or development of suicidal ideation

Suicide Risk Assessment: Moderate

Violence Risk Assessment: Moderate to high

Access to Firearms/Mean: Patient denied

Suicide Risk Factors:

Chronic: History of violence and suicide attempts, chronic cannabis and alcohol use

Acute: Cannabis and alcohol use, possible homelessness

Imminence: Patient denies current suicidal ideation intent or plan, denies homicidal ideation intent or plan

Protective Factors:

Reason for living: Supportive mother and sister

Mitigation Plan:

Continue to develop rapport with the patient and develop coping strategies, focus on reasons to live rather than to die or feel hopelessness, reduce access to means of suicide, work to develop safety crisis plan

Felt safe and appropriate for discharge at this time, patient does not meet involuntary hold criteria. His outbursts occur when he is using alcohol and cannabis.

Prognosis: Guarded

Psychotropic Medication Changes: Patient stated he did not want psychotropics

Discharge to home, IVC pending.

Meditech report ID number: [REDACTED] Facility: MCK/MR

Signed
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HISTORY & PHYSICAL